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## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Attorney Docket No.: RTS-0245  
Inventors: Monia and Cowser  
Serial No.: 09/920,677  
Filing Date: August 1, 2001  
Examiner: Karen A. Lacourciere  
Group Art Unit: 1635  
Title: Antisense Modulation of P70 S6 Kinase Expression

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On April 7, 2003

Jane Massey Licata  
Jane Massey Licata Registration No. 32,257

Assistant Commissioner for Patents  
Washington, DC 20231

**PRELIMINARY AMENDMENT AND**  
**RESPONSE TO RESTRICTION REQUIREMENT**

This Preliminary Amendment is being filed in response to the Restriction Requirement mailed March 5, 2003 setting a one month period for response. Please enter the following amendments and remarks into the record.

Amendments to the claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks begin on page 5 of this paper.

<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b>				Docket No. <b>RTS-0245</b>	
Applicant(s): <b>Mouia and Cowser</b>					
Serial No. <b>09/920,677</b>	Filing Date <b>August 1, 2001</b>	Examiner <b>Karen A. Lacourciere</b>	Group Art Unit <b>1635</b>		
Invention: <b>ANTISENSE MODULATION OF P70 S6 KINASE EXPRESSION</b>					
<u><b>TO THE ASSISTANT COMMISSIONER FOR PATENTS:</b></u>					
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	18 -	20 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	2 -	3 =	0 x	\$84.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$0.00</b>
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ A duplicate copy of this sheet is enclosed. <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. <b>50-1619</b> A duplicate copy of this sheet is enclosed. <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.					
_____ <b>Jane Massey Licata</b> Reg. No. 32,257 Licata & Tyrrell P.C. 66 E. Main Street Marlton, NJ 08053 Tel: 856-810-1515 Fax: 856-810-1454			Dated: <b>April 7, 2003</b>  <div style="border: 1px solid black; padding: 5px; margin-top: 10px;">         I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.           _____          Signature of Person Mailing Correspondence           _____          Typed or Printed Name of Person Mailing Correspondence       </div>		
CC:					

**CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)**Applicant(s): **Monia and Cowser**

Docket No.

**RTS-0245**Serial No.  
**09/920,677**Filing Date  
**August 1, 2001**Examiner  
**Karen A. Lacourciere**Group Art Unit  
**1635**Invention: **ANTISENSE MODULATION OF P70 S6 KINASE EXPRESSION**

I hereby certify that this Preliminary Amendment and Response to Restriction Requirement  
(Identify type of correspondence)

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on April 7, 2003  
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Jane Massey Licata  
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